

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

The Us Campaign Fund

ADDRESS (number and street)

499 S Capitol Street

Suite 422

☐ Check if different than previously reported. (ACC)

Washington

DC

20003

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00575662

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☒ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Lindsay F. Angerholzer

Signature of Treasurer

Lindsay F. Angerholzer

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

The Us Campaign Fund

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
01 / 01 / 2015 To: M M / D D / Y Y Y Y Y Y  
06 / 30 / 2015

|   | COLUMN A<br>This Period  | COLUMN B<br>Calendar Year-to-Date                                    |
|---|--|--|
| 6. (a) Cash on Hand<br>January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span><br><span style="border: 1px solid black; padding: 2px;">2015</span> |  | <span style="border: 1px solid black; padding: 2px;">0.00</span>     |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....   | <span style="border: 1px solid black; padding: 2px;">0.00</span>     |  |
| (c) Total Receipts (from Line 19) .....   | <span style="border: 1px solid black; padding: 2px;">82500.00</span> | <span style="border: 1px solid black; padding: 2px;">82500.00</span> |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....   | <span style="border: 1px solid black; padding: 2px;">82500.00</span> | <span style="border: 1px solid black; padding: 2px;">82500.00</span> |
| 7. Total Disbursements (from Line 31) .....   | <span style="border: 1px solid black; padding: 2px;">14019.37</span> | <span style="border: 1px solid black; padding: 2px;">14019.37</span> |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....   | <span style="border: 1px solid black; padding: 2px;">68480.63</span> | <span style="border: 1px solid black; padding: 2px;">68480.63</span> |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....   | <span style="border: 1px solid black; padding: 2px;">0.00</span>     |  |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | <span style="border: 1px solid black; padding: 2px;">0.00</span>     |  |



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

The Us Campaign Fund

Report Covering the Period:

From:

|     |   |     |   |           |
|-----|---|-----|---|-----------|
| M M | / | D D | / | Y Y Y Y Y |
| 01  | / | 01  | / | 2015      |

To:

|     |   |     |   |           |
|-----|---|-----|---|-----------|
| M M | / | D D | / | Y Y Y Y Y |
| 06  | / | 30  | / | 2015      |

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

80000.00

80000.00

(ii) Unitemized .....

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

80000.00

80000.00

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

2500.00

2500.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ▶

82500.00

82500.00

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

82500.00

82500.00

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ▶

82500.00

82500.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures:  |                               |                                   |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4)                                  |                               |                                   |
| (i) Federal Share .....  | 0.00                          | 0.00                              |
| (ii) Non-Federal Share.....  | 0.00                          | 0.00                              |
| (b) Other Federal Operating Expenditures .....   | 14019.37                      | 14019.37                          |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 14019.37                      | 14019.37                          |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 0.00                          | 0.00                              |
| 24. Independent Expenditures (use Schedule E) .....  | 0.00                          | 0.00                              |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....                   | 0.00                          | 0.00                              |
| 26. Loan Repayments Made.....  | 0.00                          | 0.00                              |
| 27. Loans Made.....  | 0.00                          | 0.00                              |
| 28. Refunds of Contributions To:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees .....                                  | 0.00                          | 0.00                              |
| (b) Political Party Committees .....   | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....   | 0.00                          | 0.00                              |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....                            | 0.00                          | 0.00                              |
| 29. Other Disbursements .....  | 0.00                          | 0.00                              |
| 30. Federal Election Activity (2 U.S.C. §431(20))  |                               |                                   |
| (a) Allocated Federal Election Activity (from Schedule H6)                                     |                               |                                   |
| (i) Federal Share .....  | 0.00                          | 0.00                              |
| (ii) "Levin" Share.....  | 0.00                          | 0.00                              |
| (b) Federal Election Activity Paid Entirely With Federal Funds .....                           | 0.00                          | 0.00                              |
| (c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....           | 0.00                          | 0.00                              |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..      | 14019.37                      | 14019.37                          |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 14019.37                      | 14019.37                          |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....          | 82500.00                      | 82500.00                          |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                              | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....      | 82500.00                      | 82500.00                          |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... ► | 14019.37                      | 14019.37                          |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                   | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) ..... ►              | 14019.37                      | 14019.37                          |

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 16

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**The Us Campaign Fund**

Full Name (Last, First, Middle Initial)

**A. Ellen Bernard**

Mailing Address 7712 Ruxwood Rd

City State Zip Code  
 Baltimore MD 21204-3537

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

06 / 30 / 2015

Transaction ID : VPFP2EA4R82

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Marc P. Blum**

Mailing Address 2907 W Strathmore Ave

City State Zip Code  
 Baltimore MD 21209-3810

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Irral, Inc.

Occupation

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

05 / 18 / 2015

Transaction ID : VPFP2DKM4C0

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**c. Mary Catherine Bunting**

Mailing Address 6506 Darnall Rd

City State Zip Code  
 Ruxton MD 21204-6423

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

06 / 04 / 2015

Transaction ID : VPFP2DRB1J4

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

15000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 7 OF 16

|   |                              |                              |                             |                             |                             |                             |                             |                             |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**The Us Campaign Fund**

Full Name (Last, First, Middle Initial)

**A. D. Keith Campbell**

Mailing Address 1018 Wagner Rd

City

Towson

State

MD

Zip Code

21204-6820

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Campbell and Company

Occupation

Investment Management

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 18    | / | 2015        |

**Transaction ID : VPFP2DKM407**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Patricia Campbell**

Mailing Address 1018 Wagner Rd

City

Towson

State

MD

Zip Code

21204-6820

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Homemaker

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 18    | / | 2015        |

**Transaction ID : VPFP2DKM472**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. Constance Caplan**Mailing Address 701 Cathedral St  
Ste 10

City

Baltimore

State

MD

Zip Code

21201-5223

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The Time Group

Occupation

Owner

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 01    | / | 2015        |

**Transaction ID : VPFP2DGRZ58**

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

15000.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**The Us Campaign Fund**

|   |  |   |
|---|--|---|
| <p>Full Name (Last, First, Middle Initial)<br/> <b>A. Suzanne Cohen</b></p> <p>Mailing Address 2 Wyndhurst Ave</p> <p>City Baltimore State MD Zip Code 21210-2412</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Retired Occupation Retired</p> <p>Receipt For:<br/> <input type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼<br/> 5000.00</p>   |  | <p>Date of Receipt<br/> M M / D D / Y Y Y Y Y<br/> 05 / 01 / 2015<br/> <b>Transaction ID : VPFP2DGRZK9</b></p> <p>Amount of Each Receipt this Period<br/> 5000.00</p> |
| <p>Full Name (Last, First, Middle Initial)<br/> <b>B. Serena Connelly</b></p> <p>Mailing Address 3156 Brookhollow Dr</p> <p>City Dallas State TX Zip Code 75234-6486</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Contran Occupation Foundation Executive</p> <p>Receipt For:<br/> <input type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼<br/> 5000.00</p>                           |  | <p>Date of Receipt<br/> M M / D D / Y Y Y Y Y<br/> 06 / 29 / 2015<br/> <b>Transaction ID : VPFP2E1YJ48</b></p> <p>Amount of Each Receipt this Period<br/> 5000.00</p> |
| <p>Full Name (Last, First, Middle Initial)<br/> <b>C. Daniel B. Drachman</b></p> <p>Mailing Address 4006 Stewart Rd</p> <p>City Stevenson State MD Zip Code 21153-0680</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Johns Hopkins School of Medicine Occupation Physician/Scientist</p> <p>Receipt For:<br/> <input type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼<br/> 5000.00</p> |  | <p>Date of Receipt<br/> M M / D D / Y Y Y Y Y<br/> 06 / 29 / 2015<br/> <b>Transaction ID : VPFP2E5Q9C5</b></p> <p>Amount of Each Receipt this Period<br/> 5000.00</p> |
| <p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p> <p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>   |  | <p>15000.00</p>   |



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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|   |                              |                              |                             |                             |                             |                             |                             |                             |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

The Us Campaign Fund

Full Name (Last, First, Middle Initial)

**A. Nancy Hackerman**

Mailing Address 3619 Woodvalley Dr

City  
BaltimoreState  
MDZip Code  
21208-1733FEC ID number of contributing  
federal political committee.

C

Name of Employer

NHP, Inc.

Occupation

Real Estate Development and Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  | / | 22  | / | 2015    |

Transaction ID : VPFP2DY2M53

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Caroline Hambleton Panitz**

Mailing Address 108 Saint Johns Rd

City  
BaltimoreState  
MDZip Code  
21210-2124FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Community Volunteer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  | / | 18  | / | 2015    |

Transaction ID : VPFP2DKM4N1

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. Mark K. Joseph**Mailing Address 111 S Calvert St  
Ste 2700City  
BaltimoreState  
MDZip Code  
21202-6143FEC ID number of contributing  
federal political committee.

C

Name of Employer

The Shelter Group

Occupation

Founding Chairman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  | / | 17  | / | 2015    |

Transaction ID : VPFP2DW0CN4

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)..... ►

15000.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 16

|   |                              |                              |                             |                             |                             |                             |                             |                             |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**The Us Campaign Fund**

Full Name (Last, First, Middle Initial)

**A. Jeffrey A. Legum**

Mailing Address 10 Stone Hollow Ct

City  
BaltimoreState  
MDZip Code  
21208-1860FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Park Circle CompanyOccupation  
Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 1 |   | 2 | 0 | 1 | 5 |

**Transaction ID : VPFP2DMEM38**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Robert E. Meyerhoff**

Mailing Address 1025 Cranbrook Rd

City  
CockeysvilleState  
MDZip Code  
21030-1465FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hendersen-Webb, Inc.Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 2 |   | 2 | 0 | 1 | 5 |

**Transaction ID : VPFP2DY2PB6**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. Howard Rosenbloom**Mailing Address 8 Reservoir Cir  
Ste 202City  
PikesvilleState  
MDZip Code  
21208-6398FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ben and Esther Rosenbloom FoundationOccupation  
Executive Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 7 |   | 2 | 0 | 1 | 5 |

**Transaction ID : VPFP2E4WQP0**

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

15000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**The Us Campaign Fund**

|   |  |                              |  |  |  |                            |  |  |
|---|--|------------------------------|--|--|--|----------------------------|--|--|
| <b>A. Full Name (Last, First, Middle Initial)</b><br><b>Paul S. Sarbanes</b>  |  |                              | <b>Date of Receipt</b><br><div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <span>M = M / D = D / Y = Y Y Y Y</span> </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <span>06 / 05 / 2015</span> </div> <b>Transaction ID : VPFP2DRPX73</b> |  |  |                            |  |  |
| <b>Mailing Address</b> 320 Suffolk Rd   |  |                              | <b>Amount of Each Receipt this Period</b><br><div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>5000.00</span> </div>   |  |  |                            |  |  |
| <b>City</b> Baltimore   |  | <b>State</b> MD              |  |  |  | <b>Zip Code</b> 21218-2521 |  |  |
| <b>FEC ID number of contributing federal political committee.</b> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span>C</span> <span></span> </div> |  |                              |  |  |  |                            |  |  |
| <b>Name of Employer</b><br>Retired  |  | <b>Occupation</b><br>Retired |  |  |  |                            |  |  |
| <b>Receipt For:</b><br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼  |  |                              | <b>Aggregate Year-to-Date ▼</b><br><div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>5000.00</span> </div>   |  |  |                            |  |  |

  

|   |  |                   |   |  |  |                 |  |  |
|---|--|-------------------|---|--|--|-----------------|--|--|
| <b>B. Full Name (Last, First, Middle Initial)</b>   |  |                   | <b>Date of Receipt</b><br><div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <span>M = M / D = D / Y = Y Y Y Y</span> </div>        |  |  |                 |  |  |
| <b>Mailing Address</b>  |  |                   | <b>Amount of Each Receipt this Period</b><br><div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span></span> </div> |  |  |                 |  |  |
| <b>City</b>   |  | <b>State</b>      |   |  |  | <b>Zip Code</b> |  |  |
| <b>FEC ID number of contributing federal political committee.</b> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span>C</span> <span></span> </div> |  |                   |   |  |  |                 |  |  |
| <b>Name of Employer</b>   |  | <b>Occupation</b> |   |  |  |                 |  |  |
| <b>Receipt For:</b><br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼  |  |                   | <b>Aggregate Year-to-Date ▼</b><br><div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span></span> </div>           |  |  |                 |  |  |

  

|   |  |                   |   |  |  |                 |  |  |
|---|--|-------------------|---|--|--|-----------------|--|--|
| <b>C. Full Name (Last, First, Middle Initial)</b>   |  |                   | <b>Date of Receipt</b><br><div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <span>M = M / D = D / Y = Y Y Y Y</span> </div>        |  |  |                 |  |  |
| <b>Mailing Address</b>  |  |                   | <b>Amount of Each Receipt this Period</b><br><div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span></span> </div> |  |  |                 |  |  |
| <b>City</b>   |  | <b>State</b>      |   |  |  | <b>Zip Code</b> |  |  |
| <b>FEC ID number of contributing federal political committee.</b> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span>C</span> <span></span> </div> |  |                   |   |  |  |                 |  |  |
| <b>Name of Employer</b>   |  | <b>Occupation</b> |   |  |  |                 |  |  |
| <b>Receipt For:</b><br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼  |  |                   | <b>Aggregate Year-to-Date ▼</b><br><div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span></span> </div>           |  |  |                 |  |  |

  

|   |  |  |
|---|--|--|
| <b>SUBTOTAL of Receipts This Page (optional).....</b>           |  | <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>5000.00</span> </div>  |
| <b>TOTAL This Period (last page this line number only).....</b> |  | <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>80000.00</span> </div> |

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 16

(check only one)

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NAME OF COMMITTEE (In Full)  
**The Us Campaign Fund**

Full Name (Last, First, Middle Initial)

## **A. FRIENDS OF JOHN SARBANES**

Mailing Address PO Box 6854

City State Zip Code  
Towson MD 21285-6854

FEC ID number of contributing  
federal political committee. **C** C00415182

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

**04** / **16** / **2015**

**Transaction ID : VPFP2DGRZC3**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

## **B.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee. **C**

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

/ /

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee. **C**

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

/ /

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2500.00

2500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**The Us Campaign Fund**

Full Name (Last, First, Middle Initial)

**A. Angerholzer Broz Consulting**

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 0 | 1 |   |   | 2 | 0 | 1 | 5 |   |   |

Mailing Address 499 S Capitol St SW  
Ste 422

City Washington State DC Zip Code 20003-4028

Purpose of Disbursement  
Bookkeeping and Compliance

001

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID : VPEPT9XQ6A3**

Amount of Each Disbursement this Period

1717.74

Full Name (Last, First, Middle Initial)

**B. Angerholzer Broz Consulting**

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 2 | 6 |   |   | 2 | 0 | 1 | 5 |   |   |

Mailing Address 499 S Capitol St SW  
Ste 422

City Washington State DC Zip Code 20003-4028

Purpose of Disbursement  
Bookkeeping and Compliance

001

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID : VPEPT9XVKNK9**

Amount of Each Disbursement this Period

750.00

Full Name (Last, First, Middle Initial)

**C. Angerholzer Broz Consulting**

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 2 | 6 |   |   | 2 | 0 | 1 | 5 |   |   |

Mailing Address 499 S Capitol St SW  
Ste 422

City Washington State DC Zip Code 20003-4028

Purpose of Disbursement  
Parking

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID : VPEPT9Z1R38**

Amount of Each Disbursement this Period

2.45

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2470.19

|                                     |     |                          |     |                          |     |                          |     |                          |    |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 21b | <input type="checkbox"/> | 22  | <input type="checkbox"/> | 23  | <input type="checkbox"/> | 24  | <input type="checkbox"/> | 25 | <input type="checkbox"/> | 26  |
| <input type="checkbox"/>            | 27  | <input type="checkbox"/> | 28a | <input type="checkbox"/> | 28b | <input type="checkbox"/> | 28c | <input type="checkbox"/> | 29 | <input type="checkbox"/> | 30b |

|                                     |     |                          |     |                          |     |                          |     |                          |    |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 21b | <input type="checkbox"/> | 22  | <input type="checkbox"/> | 23  | <input type="checkbox"/> | 24  | <input type="checkbox"/> | 25 | <input type="checkbox"/> | 26  |
| <input type="checkbox"/>            | 27  | <input type="checkbox"/> | 28a | <input type="checkbox"/> | 28b | <input type="checkbox"/> | 28c | <input type="checkbox"/> | 29 | <input type="checkbox"/> | 30b |

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**The Us Campaign Fund**

Full Name (Last, First, Middle Initial)

**A. NGP VAN**Mailing Address 1101 15th St NW  
Ste 500

City Washington State DC Zip Code 20005-5006

Purpose of Disbursement  
Software

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
05 12 2015**Transaction ID : VPEPT9XV7C4**

Amount of Each Disbursement this Period

150.00

Full Name (Last, First, Middle Initial)

**B. NGP VAN**Mailing Address 1101 15th St NW  
Ste 500

City Washington State DC Zip Code 20005-5006

Purpose of Disbursement  
Campaign Software

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 02 2015**Transaction ID : VPEPT9Y00E3**

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

400.00

13592.72